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21905 7590 06/02/2006

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JOHN J. CONNORS
 (Depositor's name)
CONNORS
 (Signature)
AUG. 17 2006
 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/757,362	01/14/2004	Gina Dellanina	9482A	3318

TITLE OF INVENTION: DENTAL HYGIENE DEVICE & TEETH POLISHING METHOD

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000 + 30	09/05/2006
EXAMINER		ART UNIT	CLASS-SUBCLASS		
LEWIS, RALPH A		3732	433-163000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list
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1 JOHN J. CONNORS
 2 CONNORS & ASSOC. INC.
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

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Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Date AUG. 17, 2006

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